



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION
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Tobacco use is one of the leading preventable causes of death in the world. The World Health Organization (WHO) attributes approximately 4.9 million deaths a year to tobacco use, a figure expected to double by 2030. Unless this trend is reversed, the vast majority of these deaths are projected to occur in the developing world. The Centers for Disease Control and Prevention's (CDC) Global Tobacco Control Program in the Office of Smoking and Health is dedicated to working with partners to act now to prevent future death and disease through effective and sustainable global tobacco prevention and control.

Mission

As the lead federal agency for comprehensive tobacco prevention and control, CDC's Office on Smoking and Health (OSH) develops, conducts, and supports strategic efforts to protect the public's health from the harmful effects of tobacco use.

Goals

- Prevent initiation of tobacco use among youth and young adults
- Promote tobacco use cessation among adults and youth
- Eliminate exposure to second hand smoke
- Identify and eliminate tobacco related disparities among population groups
- Promote comprehensive global tobacco prevention and control
- Promote tobacco product research and information dissemination

Objectives

- Strengthen global tobacco control surveillance systems to monitor the global tobacco epidemic and advance research to promote effective tobacco control programs
- Increase country and region capacity to plan, develop, implement and evaluate comprehensive tobacco control policies and programs
- Strengthen partnerships to leverage resources for efficient and sustainable tobacco control initiatives

Objective

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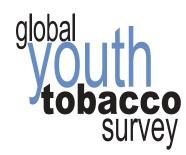
Surveillance

CDC is involved in four global surveillance activities: the Global Youth Tobacco Survey (GYTS); the Global School Personnel Survey (GSPS); the Global Medical Doctors Survey (GMDS); and the Regional Survey of Country Specific Tobacco-Related Information (Regional Survey).

The GYTS was developed by CDC and WHO (Head Quarters and the Regional Offices) to enhance the capacity of countries to design,

implement, and evaluate their tobacco control programs. The GYTS monitors youth tobacco use, attitudes, exposure to tobacco smoke, and other

critical measures through the collection, analysis, and dissemination of representative and reliable data that can be compared across countries. Over 90 countries have



completed the GYTS, 40 others have been trained and are in the field, and 25 new countries will be trained in 2003. Also, the GYTS has been repeated in four countries and will be repeated in over 20 additional countries during 2003.

The GSPS was developed by CDC and WHO (Head Quarters and the Regional Offices) to collect data from school personnel concerning their tobacco use, attitudes, policies, and curricular practices. GSPS has been conducted in 20 countries. The GMDS is a new survey that is being piloted in India and Myanmar in 2003. GMDS collects information on tobacco use and knowledge and attitudes from medical doctors and their ability to provide advice and treatment to tobacco dependent patients.

The Regional Survey has been developed in collaboration with WHO Regional Offices and CDC as a standardized instrument to track tobacco control topics including prevalence, economics, laws and regulations, and programmatic interventions. The Regional Survey has been conducted in each WHO Region at varying stages. Data will be disseminated via a web-based database such as the National Tobacco Information Online System (NATIONS), an electronically integrated database containing



similar information across all regions. A joint project of WHO, CDC, the World Bank, and American Cancer Society, NATIONS is designed to provide a mechanism to disseminate global tobacco activity information via the World Wide Web. The data from the Regional Survey is anticipated to enhance the information provided in NATIONS to strengthen global tobacco control and prevention efforts. Information about these surveillance systems is available at www.cdc.gov/tobacco/global/index.htm.

Research

CDC is working in collaboration with other executive agencies and the governments of China, India, and Mexico to produce **Country Reports**, which document the national tobacco

situation and control measures. In collaboration with international experts, CDC published **Evidence for a Causal Link between Smoking** and Tuberculosis, which concluded that a causal relationship exists between persistent smoking and the prevalence of TB and also between smoking and mortality from TB. In collaboration with WHO, CDC is performing an evaluation of cigarette samples purchased in countries other than the United States for carcinogens, toxins, and additives of public health interest. These findings will be disseminated in an International Cigarette Study that will help identify compounds of concern and agents subject to alteration by the manufacturing process. **Novel** tobacco products, such as bidis, kreteks, and water pipes, are likely to have a negative impact on public health. There is little information available about these products and their use, health effects, and marketing. Experts are being convened to build a knowledge base on these products from which a series of published reports will be produced. The Fogarty International Center of the National Institutes of Health and eight partners including CDC announced 15 Fogarty Grants supporting multi-national research partnership programs that will help combat the rise of tobacco-related disease and death in the developing world.

Objective

Increase country and region capacity to plan, develop, implement and evaluate comprehensive tobacco control policies and programs

Comprehensive tobacco control strategies require strong infrastructure of evidence-based tools, skilled professionals and effective programs.

Policy Tools

CDC, in collaboration with partners, is developing tools for enhancing national capacity to develop sustainable initiatives to promote tobacco prevention and control policies.

Skill-building Workshops

The skill-building workshops bring together committed leaders through a structured learning

environment. The workshops are designed to facilitate an in-depth understanding of the strategic approaches to design tobacco control programs and policies through case studies of successful implementation and interactive exercises for applying relevant skills. Workshops were held at the Central and Eastern European Tobacco Control Institute and at the Global Leadership Fellows Training in conjunction with the World Conferences on Tobacco or Health.

Communications and Media

Through its collaborative Tobacco-Free Sports initiative, CDC is working with WHO the International Olympic Committee (IOC), the Federation Internationale de Football Association (FIFA), and other international sports



organizations to end tobacco advertising and sponsorship for sporting events throughout the world and to ensure tobaccofree environments at all events. CDC is working with WHO and the American Legacy Foundation to develop a set of principles and practices on counter-marketing for tobacco

control advocates throughout the world. A Global Media Campaign Resource Center is under development to support and coordinate counteradvertising efforts and monitor global campaigns for tobacco control. CDC also is working with

WHO and other partners to support programs and events around World No Tobacco Day, whose theme for 2003 is tobacco-free film and fashion.

Objective

Strengthen partnerships to leverage resources for efficient and sustainable tobacco control initiatives

CDC partners with governments and a wide array of international agencies and institutions to leverage resources toward mutually shared objectives to promote comprehensive tobacco prevention and control programs and policies. Partners include the World Health Organization Headquarters and Regional Offices for Africa (AFRO), the Eastern

Europe (EURO), the Americas (PAHO), Southeast Asia (SEARO), and the Western Pacific (WPRO), the World Bank, the International Union for Health Promotion and Education, International Union for Cancer Control, the U.S. National Cancer Institute, and the Canadian Public Health Association. CDC also works with Mexico through the US-Mexico Binational Commission. CDC is a WHO Collaborating Center on Global Tobacco Control.

Mediterranean (EMRO),

For further information, please contact

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